FOR INSTRUCTIONS, SEE BACK OF FORM

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A

Des Moines, Iowa 50319 Fax: 515-281-4073

# **DISCLOSURE SUMMARY PAGE**

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

electronically.
Effective May 1, 2010, all statements and reports for State PACs and State
Parties must be filed electronically.

· .			emayled 11-23-10	
COMMITTEE NAME (Must be same as on Statement of On	ganization)		emailed 11-23-16	
PLYMOUTH COUNTY REPUBLICAN CENT		DR-2 DISCLOSURE		
IMPORTANT: Indicate by # type of committee you are reporting for (1)Statewide/Legislative/Judge Standing for Retention Candidate (4)County Central Committee (5)County Candidate (6)City Can Subdivision Candidate (8)County PAC (9)City PAC (10)School		(Rev. 12/2009) REPORT  For Office Use Only		
11 ) Local Ballot Issue			Comm. #	
CANDIDATE COMMITTEES ONLY: Candidate Name	Political Party (if applicable)		Scanned	
Office Sought District (if Senate or House)			Audited	
Late reports are subject to possible civil and criminal penalties. P candidate's committee, and the chairperson, for any other type o	rursuant to Iowa Code sections 68B.32A f committee, is the individual responsible	A(7) and 68 e for filing	BA.401(3), the candidate, for a timely and accurate reports.	
A Total	712-546-6674		11/23/10	
SIGNATURE OF PERSON FILING REPORT	TELEPHONE		DATE SIGNED	
I AM FILING A July 15, 2010 through October 14, 2010	REPORT FOR (1) ELECTION	/(2)NON	-ELECTION YEAR.	
(report date)	Indicate by	# 1		
CHECK IF AMENDMENT TO REPORT DATED		Local Con	nmittees, enter Date of Election	
☐ Check if this is final (termination) report and attach Notice (You must continue to file reports until a DR-3 is file	of Dissolution Form DR-3. ed.)		Local Committees, enter County in ction is held	
STATEMENT OF CASH ON HAN CASH ON HAND at the beginning of the reporting period. (7 committee. This amount MUST be the same as the of the last reporting period or must be zero if this is	Fotal of all funds held by the e cash on hand at the end		\$ <u>1283.04</u>	
ADD TOTAL MONEY TAKEN IN THIS PERIOD				
Schedule A: Cash Contributions total (Attach Sche	edule A) (*also see in-kind below)		\$6,507.00	
Schedule F: Loans Received total (Attach Schedu	le F)	*********		
Schedule H: Total Sales of Campaign Property (Al	ttach Schedule H)			
(Schedule H applies to Candidates' Cor	nmittees Only)		•	
	SUB-TOTAL	\$	7,790.04	
SUBTRACT TOTAL MONEY SPENT THIS PERIC	DD			
Schedule B: Expenditures total (Attach Schedule B	3) (**also see debts and loans below)		\$5800.00	
Schedule F: Loan Repayments total (Attach Sched	dule F)			
CASH ON HAND at the end of this reporting period (if final re	eport balance must be zero)	\$	1990.04	
**UNPAID BILLS (From Schedule D - Attach Schedule D)		\$		
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Sch				
**OUTSTANDING LOANS (From Schedule F - Attach Sched	dule F)	\$		
CONSULTANT BREAKDOWN (Schedule G Attached?)			YESNO	
CANDIDATE COMMITTEES ONLY:				
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Ar	ttach Schedule H)	\$		
STATE COMMITTEES: Submit a reconciled campaign acco	ount bank statement in January of ea	ch year.		

### For Instructions, See Back of Form

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
PLYMOUTH COUNTY REPUBLICAN CENTRAL COMMITTEE

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS	
	CK THIS BOX IF NDING FORM	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
9/10/10	ID# CK#	Chuck Soderberg 800 2nd St SE Le Mars, IA 51031-1727		\$100.00	х
9/10/10	ID# CK#	Dan Huseman 6144 Y Ave Aurelia, IA 51005-7007		\$100.00	х
9/10/10	ID# CK#	Jolynn Goodchild 609 Greenwood Ave Le Mars, IA 51031-2464		\$20.00	х
9/10/10	ID# CK#	Plymouth County Fair Board 251 12th St SE Le Mars, IA 51031		\$280.00 Refund	
10/7/10	ID# CK#	Ron Weick 4362 Old Lakeport Rd Sioux City, IA 51106-9658		\$5982.00	
10/7/10	ID# CK#	Stacey Feldman 35689 Muskrat Dr Le Mars, IA 51031-8089		\$25.00	х
	ID#				<del>-</del>
	CK#				
			SUB-TOTAL		

TOTAL (if last page of this schedule)

#C 507 /

\$6,507.00

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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FOR INSTRUCTIONS, SEE BACK OF FORM

## **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
В	MONETARY
(Rev. 07/03)	EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

## PLYMOUTH COUNTY REPUBLICAN CENTRAL COMMITTEE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	NUMBER			
10/8/10	ID# CK# 1113	Bill Anderson for Senate 1138 Mason Ave Pierson, IA 51048-8045	Campaign Donation	\$5,800.00
	ID#			
	CK#1114			
	ID#			
	CK#		i,	
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<del></del>	<u></u>	· · · · · · · · · · · · · · · · · · ·	SUB-TOTAL	\$
			TOTAL (if last page of this schedule)	\$5,800.00

#### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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